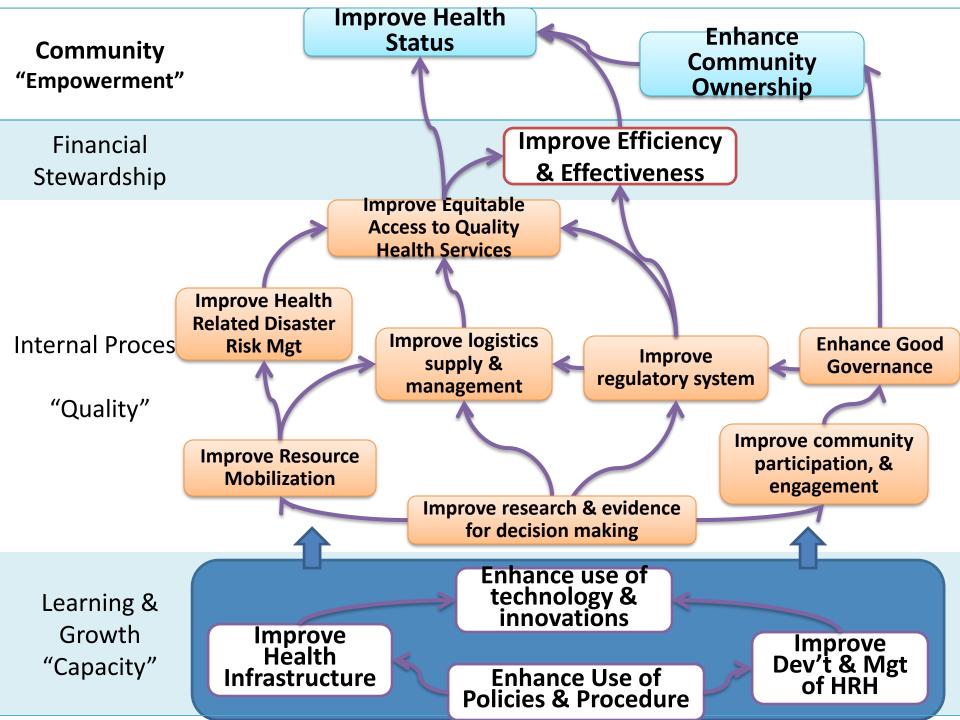
Health Sector Transformation Plan

(HSTP)

Strategic Objectives



C1: Improve Health Status

- Achievements in health status of the population and factors affecting it.
- It is meant the reduction of morbidity and mortality so that citizens will be healthier, more productive and socially active.
- It also means that social determinants of health are addressed through proactive multisectoral collaboration.
- It helps to understand what makes a community healthy or unhealthy and learn more about strategies that could work to improve the health status.

Outcome:

Enhanced quality of life, reduced morbidity and mortality and higher life expectancy

Key component:

- Analysis of health status of individuals, families and communities
- Defining factors that threaten the health of the population as well as best practices that promote health.
- Addressing social determinants of health

C1: Performance Measures

- Increase Life Expectancy at birth from 64 years to 69 years
- Reduce Maternal Mortality Ratio (MMR) from 420 to 199 per 100,000 live births
- Reduce Under five-year, Infant and Neonatal mortality rates from 64, 44 and 28 to 30, 20 and 10 per 1,000 live births
- Reduce childhood stunting, wasting and under-weight in under-5 year from 40%, 9% and 25% to 26%, 4.9% and 13%, respectively
- Reduce HIV incidence by at least 60% compared with 2010 and achieve zero new infections among children
- Reduction in number of TB deaths and incidence rate by 35% and 20% respectively compared with 2015
- Reduce malaria case incidence and mortality by at least 40% each compared with 2015.
- Stabilize and then reduce deaths and injuries from road traffic accidents
- Reduce percentage of premature mortality from NCDs by 12.5% from its current level

- Promote health in all policies and strategies;
- Promote and strengthen regional and global partnership;

C2: Enhance Community Ownership

- Refers to the end result of empowering communities to produce their own health.
- It addresses the social, cultural, political and economic determinants that underpin health, and seeks to create a solidarity movement within communities, promote locally salient innovations and build partnerships with other sectors in finding appropriate solutions to prevent problems.
- Community ownership is a much higher result of community empowerment that ensures the community does health and health related activities because it has truly believed in it and does it for its own wellbeing.
- Community ownership guarantees self-reliance and solidarity at the population level, as citizens understand health is a public good.

Outcome:

• Model family, model development team, model kebeles and model woredas

Key Components:

 Model family, Kebele and Woreda graduation; Competency evaluation of household; Scaling up best practices; Self-reliance; Recognition schemes for best performers; Affirmative action, gender mainstreaming,

C2: Performance Measures

- 80% of Kebeles will graduate as model kebeles
- At least 3 million households will be tested for level 1 HEP competency
- Community contribution (both in kind and cash) up to 1.1 Billion USD in 5 years

- Model Kebele graduation: this requires reaching all households and graduating them as models and scaling up of best practices to have better outcome at community level.
- Certificate of competency evaluation of households based on HEP standards
- Self-reliance movements
- Community representation at health facility governing boards and regular town-hall meetings and public conferences

F1: Improve Efficiency and Effectiveness

- is about proper allocation, efficient utilization, tracking and controlling of resources.
- It also entails harmonization and alignment among stakeholders to strengthen the financial and procurement management system of the government, to minimize wastage of resources and duplication of efforts.

Outcome:

- Equitable resource allocation
- Significant improvements in resource absorptive capacity
- Improved efficiency of the health system

Key components:

 IFMIS; Financial management and accountability development program; Result based financing scheme; Efficiency gains; Effective governance; Pooled procurement

F1: Performance Measures

- Increase budge utilization and liquidation rate to 100%
- Reduce catastrophic out-of-pocket expenditure exceeding 40% from 3% to 2.5%

- Financial management, transparency and accountability development program
- Rollout integrated financial management information system
- Timely and efficient procurement and logistic management
- Property administration and management enhancement
- Scale up community based health insurance and social health insurance schemes
- Efficient facility revenue utilization
- Efficiency gain
- Regular financial and performance audits

P1: Improve Equitable Access to Quality Health Services

- is meant to improve equitable access to full spectrum of essential, quality health services, including health promotion, disease prevention and treatment, rehabilitation and palliative care.
- It requires coverage with high impact interventions that address the most important causes of disease and mortality.
- Equity and Quality

Outcome:

- Improved health service utilization
- Improved population coverage with high impact interventions with reduced inequity

Key components

- Health Extension Program
- Scale up effective health interventions
- Continuous quality improvement processes
- Primary health care unit and hospital reform
- Referral system
- Blood and transfusion safety
- Laboratory and diagnostic services

P1: Performance Measures

- Coverage indicators
 - MNCAYH
 - Nutrition
 - Communicable and Non-Communicable Diseases
 - Hygiene and Env. Health
 - Clinical services

- Reproductive, Maternal, Neonatal, Child, Adolescent and Youth Health
 - Universal access to Family Planning information and services
 - Scale up postpartum family planning service to all woredas
 - Strengthen adolescent and youth focused reproductive health services
 - Universal access to essential high impact maternal, neonatal and child health services
 - Scale up respectful maternity care in all health facilities
 - Eliminate obstetric fistula and clear all backlog cases of fistula and pelvic organ prolapse
 - Enhance implementation of routine immunization improvement initiative

- Nutrition
 - Scale up community-based nutrition (CBN)
 program and the first 1000 days initiative;
 - Implement the Sequota declaration of ending child under nutrition

- Hygiene and Environmental Health
 - Implement urban sanitation strategy
 - Scale up Community led and School led total sanitation and hygiene and sanitation marketing
 - Build adaptation and resilience to climate change in health sector

Prevention and control of communicable and non-communicable diseases

- Intensify targeted HIV Prevention focusing on youth and MARPs;
- Implement Fast-Track Cities Initiative against HIV
- Enhance implementation of integrated, patient-centered TB prevention and care
- Reduce the burden of leprosy and access to quality service
- Ensure universal access to malaria prevention, diagnosis and treatment.
- Accelerate efforts towards sub-national malaria elimination from selected woredas
- Integrated Neglected Tropical Diseases (NTD) management
- Clear TT surgery backlog cases and build sustainable institutional capacity.
- Establish a program for promotion of health across the life course and prevention and control of non-communicable diseases.
- Decentralize and fully integrate mental health services into primary health care

- Hygiene and Environmental Health
 - Implement urban sanitation strategy
 - Scale up Community led and School led total sanitation and hygiene and sanitation marketing
 - Build adaptation and resilience to climate change in health sector

- Clinical services
 - Expand physiotherapy and rehabilitation services
 - Strengthen Emergency Medical System with robust prehospital and hospital care
 - Scale up essential surgical services
 - Improve diagnostic and imaging services
 - Improve access to specialty services
 - Improve referral and clinical mentorship amongst catchment facilities
 - Improve access and utilization of blood and blood products
 - Improve clean and safe health facility

P2: Improve Disaster Risk Management

- is meant to improve the prevention, mitigation, early detection and rapid response of any crises, which directly or indirectly impact the health, social, economic and political wellbeing of the society.
- Improved risk management system minimizing crises reaction and response- will keep the sector on track to move forward in all other strategic objectives and plans despite the odds.

Outcome:

- Minimized occurrence of outbreaks and consequences of disasters and outbreaks

Key component:

- Emergency risk management for health as a national and local priority
- Health risk assessment and early warning with robust surveillance and monitoring of potential threats to health, particularly from biological, natural and technological sources to enable early detection and warning.
- Education and information to build a culture of health, safety and resilience at all levels
- Reduction of Underlying risk factors to health and health systems
- Emergency preparedness for effective health response and recovery at all levels
- Meeting international health regulation core capacities

P2: Performance Measures

- By end of 2016, meet and sustain international health regulation core capacities
- 85% of Woredas and health facilities assessed annually for levels of safety, security, and preparedness
- 85% of epidemics controlled within the standard of mortality
- 95% of health facilities reporting complete and timely weekly diseases report
- Increase proportion of identified potential epidemics with adequate Emergency Drug Kits (EDKs) and other supplies from 71% to 95%

- Strengthen health sector and multisectoral coordination mechanisms to facilitate joint action on risk reduction, response and recovery.
- Education and information to build culture of health, safety and resilience at all levels
- Enhance regular risk assessment (hazard, vulnerability, and capacity analysis) and early warning; and development of public health risks profile maps for each woreda.
- Reduction of underlying risk factors to health and health systems
- Emergency preparedness for effective health system response and recovery at all levels
- Strengthen real-time surveillance and event monitoring mechanisms (like e-surveillance and linkage of lab networks for surveillance)
- Establish Emergency Operations Center (EOC)
- Develop a national health emergency workforce with the right skill mix to enhance standing and surge capacity of the country to respond to emergencies

P3: Enhance Good Governance

- the implementation of the eight major characteristics of good governance: rule of law, participatory, consensus oriented, accountable, transparent, effective and efficient, equitable and inclusive.
- It assures that corruption and rent seeking is minimized,
- the views of all segments of the community are taken into account and that the voices of the most vulnerable society are heard in decision making.
- It is also responsive to the present and future needs of the society.
- Actions that increase citizen confidence in the health system and enhance community ownership

Outcome:

• Good governance at all levels of the health sector

Key components

- Participatory engagement of civil servants to improve the bureaucracy and service delivery
- Development and dissemination of Patient and citizen charters and timely measurement of progress against the charters
- Accountability and transparency through performance measurement, engagement of the public and civil societies
- Organized engagement of the private sector
- Complaint handling
- Public participation by holding town-hall meetings, public conference, etc

P3: Performance Measures

 By 2020, developing regions will have performance levels of priority intervention similar to the national average

- Enhance leadership capacity to foster professional education and development with the goal of inspiring and motivating health professionals to be committed and servant to the public.
- Enhance implementation of patient and citizen charters and track progress
- Establish public health leadership incubation centers
- Facilitate gender equity in the leadership and gender mainstreaming
- Special and targeted support to developing regions to reduce the state of inequality.
- Strengthen town-hall meetings of health facilities to promote engagement of the public.
- Introduce Kaizen and strengthen health sector reform for quality improvement
- Accountability and transparency through performance measurement, engagement of the public and civil societies (e.g. Citizen scorecards)

P4: Improve Regulatory Systems

- refers to improving the regulatory system to a level that is truly functional.
- Functional regulatory system refers to implementation of an effective, transparent and accountable system that ensures adherence by all state and non-state actors to the standards set by the country's rules and regulations.

Outcome:

 Assurance of safety and quality of health and health related products, and services

Key Component:

- Food safety and quality,
- Regulation of drugs, equipment and supplies
- Regulation of Health professionals,
- Regulation of health care facilities
- Safety and efficacy of Traditional medicine and practice,
- Information communication technology supported regulation,
- Hygiene and environmental regulation,

P4: Performance Measures

- Achieve 100% inspection of manufacturers, importers/wholesalers, retailers and health facilities as per the standard;
- Improve consignment laboratory test of food and health products from 14% to 80% and 3.4% to 25%, respectively;
- Improve post marketing surveillance of food and health products from 10% to 100% and 3% to 55%, respectively;
- Improve the monitoring of ADR (Adverse Drug Reaction) to 90% and proportion of validated ADR reports to 100%;
- At least 5 new local pharmaceutical manufactures to be compliant with international GMP (Global Manufacturing Practices);
- Decrease the percentage of substandard medicines circulating in the market from 8% to 1%;
- Increase the number of healthcare facilities that implement the national healthcare facility standards to 100%;

- Build and maintain adequate food systems and infrastructures to respond to and manage food safety risks along the entire food chain, including during emergencies;
- Transform the pre-licensing and post-licensing inspection of food and medicine to enhance transparency, accountability, efficiency and effectiveness of the process.
- Strengthen capacity and implement strategies to fast-track the registration of food and medicine based on scientific assessment of their safety, efficacy and quality in order to achieve zero backlog of dossiers and pre-market sample test
- Ensure that all premises and practices used to manufacture, store, distribute and dispense pharmaceutical products comply with current guidelines on Good Manufacturing Practice, Good Storage Practice, Good Distribution Practice, and Good Pharmacy Practice.

- Strengthen the quality management system to ensure that inspections are planned, conducted, documented and followed up in a consistent way, based on risk assessment.
- Strengthen the national quality control laboratory with adequate capacity to undertake quality surveillance.
- Implement risk-based system of inspection and sampling to monitor quality of products on the market and establish effective recall procedures
- Coordinate and implement anti-counterfeit medicine program
- Strengthen quality control testing of each batch of product to verify that products comply with the specifications of the marketing authorization.
- Strengthen Pharmacovigilance and improve the interface with clinical surveillance

- Enhance regulation of the safety and quality of blood, blood products, tissues and human organs
- Implement measures and programs to tackle antimicrobial resistance
- Development and retention of highly competent and accountable regulatory personnel
- Strengthen national capacity to control clinical trials to ensure conformity with ethical principles for medical research involving human subjects.
- Strengthen narcotic drugs, psychotropic substances and tobacco control.
- Strengthen regulation of health professionals through transparent, accountable, proportionate, consistent and targeted practices.
- Introduce and scale up clinical audits in health facilities to ensure quality of practice in health facilities

P5: Improve Logistics Supply and Management

- The focus is to ensure access to quality assured, safe, effective and affordable essential medicines with which the sector intends to respond to the majority of health problems of the society; significant reduction in the pharmaceutical wastages and improved rational drug use.
- A strong pharmaceutical supply chain supported by an effective logistic management system ensures that the right quality product, in the right quantities, and in the right condition is delivered to the right place, at the right time, for a reasonable cost.

Outcome:

• Assurance of uninterrupted supply of essential pharmaceuticals that are of assured quality, safety, efficacy and cost-effective with their proper use.

Key components

- Revolving Drug Fund
- Integrated information management system for pharmaceutical supply and services
- Selection of essential medicines, quantification and procurement efficiency
- Warehouse, inventory, fleet and distribution management systems
- Auditable pharmaceutical transactions and services
- Supply chain modeling to analyze needs for management and scale up of commodities
- Community pharmacies
- Rational use of medicines
- Integrated pharmaceutical waste management

P5: Performance Measures

- Increase availability of essential drugs for primary, secondary and tertiary healthcare to 100%.
- Reduce wastage rate to less than 2%.
- Increase proportion of essential drugs procured from local manufacturers from 25% to 60%.
- Reduce procurement lead-time from 240 days to 120 days

- Enhance efficiency in selection, quantification and procurement of essential medicine
- Optimize warehouse, inventory, fleet and distribution management systems
- Scale up integrated information management system for pharmaceutical supply and services
- Scale up auditable pharmaceutical transaction and services to all health facilities.
- Scale up community pharmacies
- Implement innovative strategies to shape the market in order to ensure affordability of essential drugs
- Strengthen supply chain modeling to analyze needs for management and scale up of commodities
- Undertake measures to reduce drug wastages and integrated pharmaceutical waste management
- Promote rational drug use
- Improve access to medicines through quality local production

P6: Improve community participation and engagement:

 This means creating awareness, transferring knowledge and skill to the community, and ensuring their participation and engagement in planning, implementation, monitoring and evaluation of health activities to empower the community so that they will be able to produce their own health.

Outcome:

- Community empowerment; communities gain control over their health
- Improved healthy behavior
- Households able to produce their own health

Key components

- Strengthen HDA
- Competency testing of model families (HDA leaders)
- Knowledge and skill transfer
- Shared responsibility of the community
- Community based resource generation

P6: Performance Measures

• At least 90% of households engaged regularly in the Health Development Army (HDA)

- Roll out the second generation health extension program
- Reform and implement urban and pastoralist health extension programs
- Strengthen HDA to contribute to better health outcome through empowering individuals, families and communities
- Increase health literacy and health system literacy of the public to improve quality of care
- Enhance evidence based health education and behavioral change communication
- Strengthen accountability of the health system to the public by implementing strategies to build trust and credibility with communities that their input is honored and acted up on.

P7: Improve resource mobilization

 a proactive approach in the mobilization of resources from domestic and international sources through establishment and strengthening of risk pooling mechanisms, increasing health budget from treasury, collection of revenues by health institutions, strengthening international health partnership and enhancement of pool funding; public-private partnership, and maximizing collaboration with national and international civil society organizations and NGOs.

Outcome:

- Adequate resources are mobilized and are made available

- Strengthen healthcare financing reform implementation
- Scale up health insurance schemes (both community based and social health insurance),
- Introduce proactive and innovative domestic financing mechanisms,
- Attract new donors to the health sector
- Harmonization and alignment
- Public-Private Partnerships
- Multisectoral approach
- Community mobilization

P7: Performance Measures

- Establish community based health insurance (CBHI) schemes in 80% of woredas and enroll at least 80% of households.
- Reduce out-of-pocket health expenditure to less than 15%

P7: Strategic Initiatives

- Increase government budget allocation to the health sector.
- Strengthen implementation of the healthcare financing reform
- Scale up health insurance schemes (both community based and social health insurance),
- Introduce proactive and innovative domestic financing mechanisms
- Enhance Health Partnership and Coordination (DPs, CSOs/NGOs, PPPH, FBOs).
- Strengthen resource tracking and management.
- Mobilize aligned external resources through enforcement of mutual accountability and trust

P8: Improve research and evidence for decision making

- improving decision making through evidence generation, translation and dissemination. The process of evidence generation and decision making includes:
 - Research, surveys, surveillance,
 - HMIS, monitoring and evaluation and planning
 - Knowledge managemnt.

Outcome:

- Evidence based decision-making.
- Determination of progress and impact, based on quality data;

- Health sector policy and planning:
- Health Information System
- Health Research
- Knowledge management

P8: Performance Measures

- 100% of expected report received from reporting units as complete and on time.
- Increase proportion of health facilities that conduct lots quality assurance sampling (LQAS) from 36% to 85%.
- 100% of health facilities received integrated supportive supervision at least once per year

P8: Strategic Initiatives

- Implement a "one plan", "one budget" and "one report"
- Develop and implement evidence-based, scientifically sound policydecision and planning.
- Strengthen routine reporting and performance monitoring system.
- Strengthen survey and surveillance systems.
- Build capacity of health facilities, Woredas, Zones, and regions to analyze and use data for decision making at local level.
- Supportive supervision and inspection.
- Data quality assurance and auditing.
- Conduct basic and applied research to promote evidence based practice
- Promote and institutionalize knowledge management
- Collaborate with relevant authorities to scale up civil registration and vital statistics nationally and use the data to inform planning and programing

CB1: Enhance use of technology and innovation

- Enhancing use of the existing technology, introduction of new technology, technology transfer and development and use of local technology.
- It also addresses finding better ways of doing things through more effective products, processes, services, technologies or ideas.
- Technologies and innovations need to be considerate of climate change in terms of brining practical solution for the effect of climate change on human and its environment as well as avoid unwanted contribution to climate change.

Outcome:

 Efficient and effective internal business process of the health system and promote Self-reliance.

- Biotechnology
- Use of eHealth services (eHMIS, EMR, M-health)
- Telemedicine, Tele education
- Technology transfer for vaccine and diagnostic materials production

CB1: Performance Measures

- Three newly developed production packages products (biotechnological vaccines and biological product types) will be produced and distributed in five years.
- 80% of facilities equipped with medical equipment as per the essential medical equipment list
- Five social innovations identified formulated and scaled up

CB1: Strategic Initiatives

- Develop an essential medical equipment list based on clinical guidelines to promote access to quality medical devices.
- Strengthen regulations to encourage technology transfer
- Strengthen the human and laboratory capacity of research institutions and linkage with industries.
- Strengthen and scale up the training of biomedical engineers and technicians
- Establish a medical equipment refurbishment center
- Build national capacity to do health technology assessment to contextualize global knowledge, support transparent and accountable decision-making.
- Prioritize and implement strategies to promote biotechnology in health in Ethiopia
- Establish Grand challenges Ethiopia, a mechanism to promote innovation and transfer of knowledge and technology from global innovation market place

CB 2: Improve Development and management of Human resource for health

 Human resource planning, development and management. Focuses on recruitment as per the need, deployment, performance management and motivation. It also includes leadership development, promoting women in leadership positions and community capacity development.

Outcome:

• Availability of adequate, competent, motivated and committed health professionals

- Compassionate, respectful, and caring health professionals
- Strengthen quality of pre service training
- Continuing Professional Development (CPD)
- Production and deployment of health workers with appropriate skill mix and geographic distribution
- Enhance human resource management practice including motivation and retention schemes
- Strengthen Human Resource Information System (HRIS)
- Enhance gender mainstreaming capacity of the health workforce

CB2: Performance Measures

- Increase stock of health workforce (disaggregated by cadres and regions) from the current 0.8/1000 to 1.6/1000
- Reduce staff attrition rate from 6.6% to 4%.

CB2: Strategic Initiatives

- Scale up training and development of health professionals based on health needs
- Maintain and improve competence of the health workforce
- Staff all hospitals with BSc Nurses with emphasis to specialty nursing
- Provide support for quality audits of all existing pre-service training programs.
- Universities/Health science colleges industry linkage and Medical schools twinning (National and international).
- HRIS
- Reduce inequity in geographic distribution and skill and gender mix of health care workers
- Enhance Motivation and retention
- Enhance performance and productivity

CB3: Improve health infrastructure

- Involves development of standard design of health infrastructures, carry out their constructions, maintenance, renovation, rehabilitation, equipping and furnish them in user friendly manner.
- Utilities are among key determinants of functionality of health infrastructures that require a great deal of attention in management and expansion of health and health related facilities with basic ICT infrastructure for speedy and reliable services.

Outcome:

• Create standardized and functional health facilities and ICT infrastructure for health and health related services

- Constructions of Health and Health related Facilities
- Expansions and rehabilitations of Hospitals and Health Centers
- Maintenance and renovation of health and health related Facility
- Provision of utilities
- Deployment and expansion of ICT infrastructure
- Adoption of medical equipment, construction and ICT Standards
- Avail medical equipment's maintenance tools and devices

CB3: Performance Measures

• Maintain effective primary health care coverage at 100%

CB3: Strategic Initiatives

- Expand health facilities to meet the national standard and improve access to quality care
- Build capacity to timely maintain and rehabilitate health facilities
- Provision of utilities (water supply, toilet, incinerator, placenta pit, power supply)
- Design a generic general and tertiary hospital designs and work towards equitable distribution of these facilities.
- Build a medical city in Addis Ababa through public-private partnership.
- Construct a tertiary level children hospital.
- National digital health and health related database repository.
- Adoption of medical equipment, construction and ICT Standards.

CB4: Enhance policy and procedures

- Strengthening of health system through continuous analysis and improvement of existing health and health related policies, proclamations, regulations, guidelines, standards, directives and other health related legal frameworks in the sprite of health in all policies.
- This strategic objective also focuses on ensuring health is addressed in other sectors policies and strategies fostering healthy public policies.

Outcome:

• Enabling policy and legal environment that enhance the business processes in the health sector.

- Enabling frameworks and laws to protect the right of citizens to equitable and quality health care.
- Regular monitoring and review of the state of inequality in the health sector and develop strategies to redress it.
- Climate resilience and adaptability framework for health sector
- Development of policies, standards, laws, manuals and procedures for betterment of the health of all Ethiopians

CB4: Strategic Initiatives

- Develop enabling legal frameworks and policies to ensure equitable access to quality health care.
- Implement mechanisms to regularly monitor and review of the state of inequality in the health sector and develop strategies to redress it.
- Develop, disseminate and implement climate resilience and adaptability framework for health sector
- Develop and disseminate of policies, standards, laws, manuals and procedures for betterment of the health of all Ethiopians

THE TRANSFORMATION AGENDA

Transformation Agenda

- 1. Transformation in equity and quality of health care
- 2. Information revolution
- 3. Woreda Transformation
- 4. The Caring, Respectful and Compassionate health workforce

Thank You